

Annual Report Summary

2018/19





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Contents

Welcome by Dr Kiren Collison, Clinical Chair and Louise Patten, Chief Executive

04

Who we are

06

How OCCG spent it's money

08

Key achievements

10

A good start in life

Living well

Aging well

Tackling wider issues that determine health

Involving you

30

Welcome and introduction

Welcome to this annual report summary which gives you the chance to find out what Oxfordshire Clinical Commissioning Group (OCCG) has achieved and the challenges we have faced over the past year 2018/19.

We have made real progress in the way healthcare is delivered in the county. The primary care visiting service, as well as the new advanced nurse practitioner outreach pilot are providing care for people in their own homes and helping to stop hospital admissions. Clinicians in Oxfordshire are pioneering new approaches to reduce the mortality rate of babies; we are achieving better diabetes outcomes and improving cancer detection.

There is investment in perinatal mental health support and we have extended mental health support for people in crisis over the weekend when traditional services have not always been available.

We have continued to improve access to GP appointments and more routine bookable appointments are now available in the evenings and at weekends.

This year there has been a real focus on developing how we work better together with all our partners across the NHS and social care; yet we must do more. Demand for health and social care services is increasing year on year. To face this challenge head on we need to continue to work together to implement the NHS Long Term Plan.

We will continue to put patients and the public at the centre of what we do; to do this we will use a more 'place-based' approach for planning and providing health and care.

We look forward to the year ahead.



Dr Kiren Collison
Clinical Chair



Louise Patten
Chief Executive



Who we are

OCCG is the NHS organisation in Oxfordshire that plans, buys and oversees health services for everyone living in the county. We work with local people, local GPs, hospital clinicians and other partners including local government and voluntary sector.

All GP practices in Oxfordshire are members of OCCG. The views of the health professionals who work in these surgeries and who have first-hand experience of treating our patients, inform our priorities.



GP practices – **70**



Number of patients – **720,000**

A new Oxfordshire Joint Health and Wellbeing Strategy (2018 – 2023) was developed during 2018. Coordinated by Oxfordshire County Council and OCCG the new strategy was produced with input from the public, voluntary sector and health and social care partners.

The strategy is all about people who live in, work in and visit Oxfordshire and tells the story of how the NHS, councils and Healthwatch work together to improve health and wellbeing with the vision of:

Working together in supporting and maintaining excellent health and wellbeing for all the residents of Oxfordshire

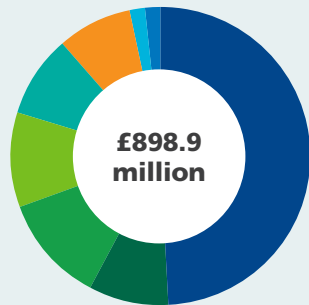
The Strategy takes a life course approach to delivering its priorities

- A good start in life
- Living well,
- Ageing Well
- Tackling wider issues that determine health



How OCCG spent its money

In 2018/19 we spent **£898.9 million** which was within our total budget of **£922.4 million**. Here is a breakdown of how it was spent:



£442.9m	Acute (hospital care)
£77.1m	Community healthcare
£104.7m	Primary care
£93.8m	Delegated co-commissioning
£78.7m	Mental health and learning disabilities
£73.4m	Continuing healthcare
£15.8m	Other programmes
£12.5m	Running costs

What did that buy...

213,921

calls answered by NHS 111



66,658

planned inpatient admissions and day cases



103,924

calls to out of hours GP services



90,822

ambulance incidents



184,394

attendances at A&E and Minor Injuries Units



and more...



Key Achievements

A GOOD START IN LIFE

Improving mental health services for children and young people

Children and young people in Oxfordshire will get better access to mental health services after the county was chosen as an NHS 'trailblazer site' by the Government.

As a result OCCG was awarded £5.4m in extra funding until 2021. This new investment, under the Government's Children and Young People's Green Paper initiative, will be used to pilot reducing waiting times for Child and Adolescent Mental Health Services (CAMHS) to four weeks by 2021. The funding will also support Oxford Health in partnership with Response and Oxfordshire County Council to bring new mental health practitioner teams into primary and secondary schools in Oxford. The new practitioners will be trained via Reading University and funding will support two new pilot Mental Health Support Teams in the first phase.

Supporting new mums' mental wellbeing

Suffering mental health problems can mean poor outcomes for women and their children with wide ranging and lifelong consequences if not treated promptly. OCCG has been successful in securing funding for a new specialist perinatal mental health service for women who have mental health problems during or after their pregnancy.

An estimated 20% of women develop mental health problems in the perinatal period; the new service will support women with complex cases who have so far not had specialist support. The service will be based in community mental health teams and

will work across maternity and community services to provide assessment and intervention for women with moderate to severe mental health problems.

Health and Wellbeing Hub in Rose Hill, Oxford

An early pregnancy service was launched in June 2018 at the Rose Hill Community Centre in Oxford. This unit is for women in the early stages of pregnancy who are in pain, bleeding or having other problems which are concerning them. By providing early pregnancy care out in the community in a calm and less medicalised environment, women can be supported more sensitively. If women are experiencing problems in their pregnancy, which in some cases can sadly lead to a miscarriage, the service can prevent an unnecessary and potentially upsetting visit to hospital.

The hub in Rose Hill also offers strength and balance classes for frail, older people and those with Chronic Obstructive Pulmonary Disorder (COPD).

Additional scan for high risk pregnant women

All pregnant women in Oxfordshire are offered a routine dating scan at around 12 weeks and a further anomaly screening scan at 20 weeks. OUH is the only trust in the country to offer a new screening programme to detect babies whose growth is poor later in pregnancy.

This includes a 36 week growth scan for all women and additional growth scans for women whose pregnancies are higher risk.



Key Achievements

LIVING WELL

Introduction of an integrated respiratory team in the community

In November 2018 OCCG launched an Integrated Respiratory Team pilot project to support patients with long term respiratory conditions such as Chronic Obstructive Pulmonary Disorder (COPD) and asthma.

This initiative will improve all round patient care - including mental health support and end of life care. More care is being provided for patients in their own home or closer to home via GP practice-based specialist clinics. Patients are also being supported to manage their conditions better which will have a direct and positive impact on their overall health. Better outcomes for patients will mean fewer hospital admissions and a reduction in treatment costs.

Patients in Banbury, Chipping Norton and Oxford City are taking part in the pilot, which is also being supported by pharmaceutical company Boeringher Ingelheim. If the pilot project is successful, it could lead to the service model being established across the whole of Oxfordshire.

Suspected CANcer (SCAN) Pathway

Many patients visit their GP with 'vague' symptoms such as weight loss and tiredness. These symptoms are called 'non-specific' as they affect the whole person. Often the cause of these symptoms remains unclear after GP assessment. While there is often

a minor cause for such symptoms, there is a small chance that they could be the signs of a serious illness, such as cancer.

Before the launch of the SCAN pathway two years ago, GPs did not have a way to get rapid investigations for patients with 'non-specific' symptoms, with patients going back and forth between their GP and the hospital many times until a diagnosis was made. Although the risk of serious disease is low, a delay in diagnosis and treatment can have a negative effect on the patient's health.

The SCAN pathway aims to lower the referral threshold for suspected cancer and help those patients with 'non-specific' symptoms. It involves rapid access to Computed Tomography (CT) and laboratory tests (blood and faeces tests); with possible further tests if needed. The aim is to reach a diagnosis and begin treatment faster than previously happened.

Between 4 April 2017 and 28 January 2019 the service has received 1,260 referrals, with an average of 20 referrals per week.

Of 1,063 eligible patients as at 28 January 2019, 942 had been through the SCAN pathway. This resulted in 92 confirmed cancer diagnoses making the Oxfordshire SCAN cancer detection rate higher than the national average.

A number of serious but non-cancer diagnoses have also been found through the investigations undertaken as part of the pathway including: heart failure, coronary artery disease; Addison's disease; and hernia.



Key Achievements

Improving diabetes care and prevention

There are around 56,000 people in Oxfordshire thought to be at risk of developing Type 2 diabetes. This can lead to other serious conditions including stroke, heart diseases, limb amputation and early death. However, in most cases it is preventable and also reversible if caught early. In June 2017 OCCG introduced the national NHS Diabetes Prevention Programme.

This local service for people who are at risk of Type 2 diabetes is to stop or delay the onset of the disease through a range of personalised lifestyle interventions, including education on lifestyle choices, advice on weight loss through healthier eating and bespoke physical activity programmes. There are also extra initiatives to help those people who already have both Type 1 and Type 2 diabetes, these include:

- Development of GP practice diabetes multi-disciplinary team consultations where a diabetes consultant and community diabetes specialist nurse attend the practice to meet with lead GP and practice nurse to review care and share good practice.
- Support to increase the number of community diabetes specialist nurses in the county
- Development of diabetes locality coordinators, including GPs and practice nurses with a focus on diabetes support
- Development of a multi-disciplinary diabetic foot care team who work closely with community podiatry

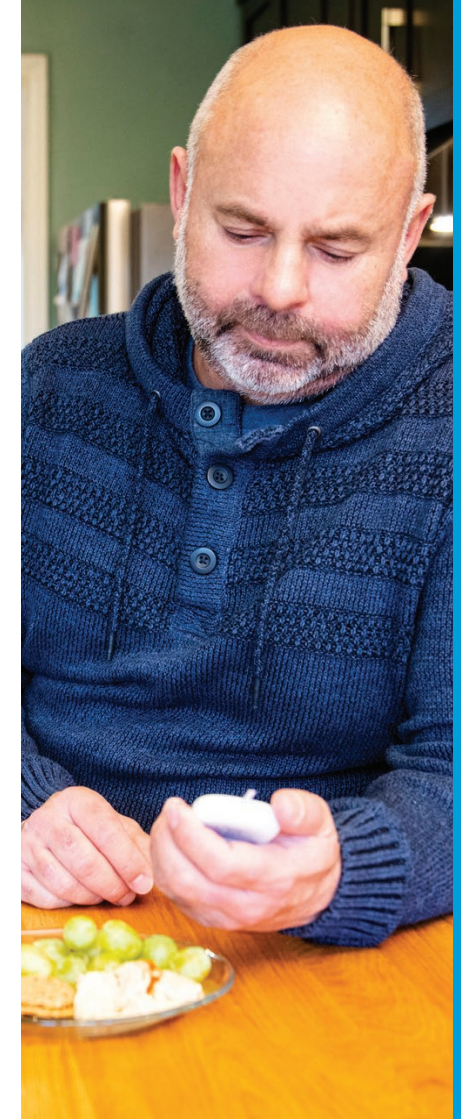
Focussing on mental health

During 2018/19 OCCG has continued to focus on making sure that mental health is given equal priority to physical health. OCCG and Oxford Health recognise that the amount spent on mental health services should increase, at least to the 80% level of other services within the county. Both organisations recognise that if Oxfordshire is to spend a proper and significant share of its resources on mental health, it will need to spend proportionately less on something else.

While work continues to address the funding issues the latest figures from NHS England rated the performance of health services in Oxfordshire for people with dementia, mental health problems and learning disabilities as 'outstanding' or 'good'.

Improving access to psychological therapies

People with one long term condition are two to three times more likely to suffer from depression or anxiety, and people with more than one condition are seven times more likely. Research shows better mental health encourages people to take medication properly.



Key Achievements

TalkingSpacePlus (a partnership between Oxford Health NHS Foundation Trust, Oxfordshire Mind and Principal Medical Limited commissioned by OCCG) provides mental health information and cognitive behavioural therapies. This year, the service saw more than 11,000 people to support their mental wellbeing and mild to moderate depression and/or anxiety.

OCCG continues to focus on improving access to mental health support for people with physical long term conditions, in particular diabetes, chronic obstructive pulmonary disorder, asthma, cardiac problems and also chronic fatigue syndrome.

Over the last year, patients with irritable bowel syndrome and chronic pain were also being included.

Providing a Safe Haven

This new service run by the Oxfordshire Mental Health Partnership provides an out-of-hours, non-clinical space in Oxford city centre offering mental health crisis support, signposting, safety planning and listening support.

The Oxford Safe Haven (OSH) is open on Friday, Saturday, Sunday and Monday from 6pm until 10pm. Since it opened the service has supported 92 individuals.



Key Achievements

AGEING WELL

Providing care closer to home

2018/19 saw the launch of a three month pilot to provide assessment and treatment of acutely unwell frail elderly patients in their usual place of residence to avoid a hospital admission. The pilot enabled patients who might be too frail to travel to and from the unit to be referred by GPs and paramedics by phone and triaged to the advanced nurse practitioner outreach service.

The Rapid Access Care Unit at Townlands Memorial Hospital, in Henley on Thames has been running for over two years now. It provides assessment and treatment of patients with a crisis or deterioration in their health. The service continues to help to reduce A&E attendances and admissions, and has been positively received by the community.



Key Achievements

TACKLING WIDER ISSUES THAT DETERMINE HEALTH

New approach to planning health and care launched in Oxfordshire

Health and care partners in the county have agreed a new approach to planning health, care and wellbeing services using, 'population health management'. This approach is based on the needs of the local population.

The first area to benefit from this new approach is the OX12 postcode (Wantage and Grove and surrounding villages). This approach features in the NHS Long Term Plan and aims to improve physical and mental health outcomes, promote wellbeing and reduce health inequalities across an entire population. In the OX12 area we are creating an evidence base of data that includes an analysis of the health and care profile of the local area. This information will help us plan and deliver services in the most appropriate ways and in the most convenient places.

This partnership approach focuses on prevention and understanding the wider factors that affect people's health, as well as developing quality services and support when and where they are needed. While every person has unique requirements and circumstances, working at scale across a whole population identifies groups with similar health and care needs and characteristics.



Development of Primary Care Networks

The NHS Long Term Plan sets out an ambitious programme of change for primary care and community services with the development of Primary Care Networks (PCNs). PCNs are based around a GP registered list of approximately 30,000 – 50,000 patients, including GP practices and other partners in community and social care.

They offer services on a scale that is small enough for patients to get the continuous and personalised care they value, but large enough – in their partnership with others in the local health and care system – to be resilient and sustainable. In Oxfordshire 19 PCNs have now been formally agreed covering the whole Oxfordshire population.

New ways of working as part of the NHS long term plan:

Patients are set to get longer appointments with their family doctor thanks to new ways of working. Practices large and small will work to support each other and deliver a wider range of specialist care services for patients from a range of skilled health professionals. They will be able to recruit multi-disciplinary teams including pharmacists, physiotherapists, paramedics, physical associates and social prescribing support workers, freeing GPs to focus on the sickest patients.

Integrated Care System

Oxfordshire is to be part of new 'integrated care system' created by the NHS in England to improve health and social care services. The new joined up care system also covers Buckinghamshire and Berkshire West. As part of a system, the NHS and local authorities in the three areas aim to deliver a person-centred vision for health and care services, making sure services are planned and delivered as locally as possible.

Key Achievements

Extended hours for GP appointments

GP access hubs, which are clusters of GP practices working together, continue to offer people routine bookable appointments to see a doctor or practice nurse at the weekend or in the evening. In 2018/19, extended access hubs offered 78,947 extra routine appointments over and above those available in practices.

This service allows patients to get an appointment at a time which suits them, reducing waiting times. It also frees up practice time for GPs to see more vulnerable patients reducing the risk of them being admitted to hospital.

Reviewing Obstetric Services at the Horton General Hospital

Following a referral to the Secretary of State, by the Oxfordshire Health Overview and Scrutiny Committee (HOSC), challenging OCCG's decision to make permanent a temporary closure of the obstetric unit at the Horton General Hospital and replacing it with a Midwifery Led Unit, OCCG and OUH embarked on a project to review the options and seek feedback from new mums.

The work includes a detailed appraisal of options and learning from experiences of mothers, families and staff of maternity services provided in Oxfordshire, ensuring the views of those mothers in South Warwickshire and South Northamptonshire who use these services are also taken into account.

As part of this work, the stakeholder events were well attended with representation from a wide group of stakeholders across north Oxfordshire, south Warwickshire and south Northamptonshire. Information was shared on the following:

- The clinical model for maternity services in Oxfordshire
- Planned housing growth and likely impact on population growth
- Travel and access
- Finance

Participants engaged in discussion about these topics before helping to weight the criteria to be used in assessing the various options for the future.

A survey was also carried out to help us understand the experience of those who have used maternity services since the temporary closure of the obstetric service at the Horton General Hospital. Over 1000 women and more than 400 partners responded to the survey. The full results are available on our website.



Key Achievements

Tackling winter pressures in the county

A fresh approach to tackling the growing pressures of winter across the county's health and social care system was undertaken in winter 2018/19. Oxfordshire appointed a Winter Director to ensure all health and care professionals in the county worked together to deliver better, responsive and more joined-up services, especially during the flu season.

This joined up approach, helped to achieve a 9% increase in acute hospital discharges compared with the previous winter and an overall reduction in acute length of stay. There were no 12 hour A&E trolley waits which is significant improvement from the previous year.

A joint communications campaign was successfully launched to spread the word to patients, public and all NHS and social care staff about the steps everyone can take to prepare their own personal winter plan. In addition, the campaign targeted local information about Minor Injuries Units, produced a 'pocket' guide to services and promoted GP extended hours access hubs.

The winter team also continued to reduce the numbers of people "stranded" in hospital when they are medically fit to leave.

SOS bus helps to alleviate pressure on A&E over festive period

The SOS bus, provided by South Central Ambulance Service, returned to Oxford at the end of 2018 to help NHS and emergency services across the city cope with winter demands. Most people who presented themselves at the SOS service bus were able to be treated at the scene and did not go to A&E.



Key Achievements

WORKING WITH YOU

How OCCG is tackling health inequalities

OCCG has been working to reduce health inequalities and improve access to health services, especially for people from the nine protected characteristic groups, as defined in the Equality Act 2010. Some examples include:

Dementia awareness training for stakeholders in Banbury, including the Mosque committee members and Police Community Support Officers

Health literacy pack to be used alongside English for Speakers of Other Languages classes and as part of the Syrian Vulnerable Persons Resettlement Scheme

Working with some Black and Minority Ethnic groups to seek views on the Older People's Strategy consultation

Survey with homeless and vulnerable people to find out their views on GP services

OCCG and partners hosted the 'Good Practice Exchange' event which gave organisations a wider understanding of the health inequalities work going on in the county with a focus on mental health, regeneration and men's health. Workshops were also run on physical activity, employment and food poverty.



Engaging people and local communities

Communicating and engaging with the local population is a priority for OCCG. The organisation is committed to putting the patient first and applying the principle of 'no decision about me without me' in its commissioning approach. The population of Oxfordshire is diverse and each community has different needs. It is important for us to understand this diversity to ensure health services are planned properly and provide equity in terms of access, experience and outcomes for everyone.

OCCG tailors its engagement materials and activity to enable people with different needs to participate in the work of the CCG. An example of this was engagement undertaken to seek views on two options for the NHS vasectomy service in Oxfordshire: either to stop it (decommission the service except where there are exceptional circumstances) or alternatively to introduce eligibility criteria.

The survey was produced in an easy read format to support responses from people with a learning disability; this group had been identified in the equality analysis for the project. OCCG also ran two focus groups primarily inviting people with a learning disability, families and carers. An analysis of the survey and focus group discussions is currently being undertaken and a report will be published later in early summer.

A full report on public involvement activity of OCCG for 2018/19 is available here www.oxfordshireccg.nhs.uk

Overleaf are a few examples of the impact public involvement has had on planning services.

Key Achievements

Joint Older People's Strategy

Together OCCG and OCC, on behalf of the health and care system in the county, worked together to develop an older people's strategy. The work was carried out during the summer of 2018 and included a survey and outreach community work to meet and discuss with older people what matters most to them as they age. Following this the draft strategy was consulted upon.

Four key areas emerged including loneliness and isolation; keeping active and healthy; access to services; planning and lifestyle. These have been used as key themes in the strategy.

The new vision and priorities for the strategy were also co-produced with a wide range of people whose work and lives the strategy affects. This included; members of the public, service users, patients and their families, clinicians, local councillors, commissioning and service managers and third sector organisations.

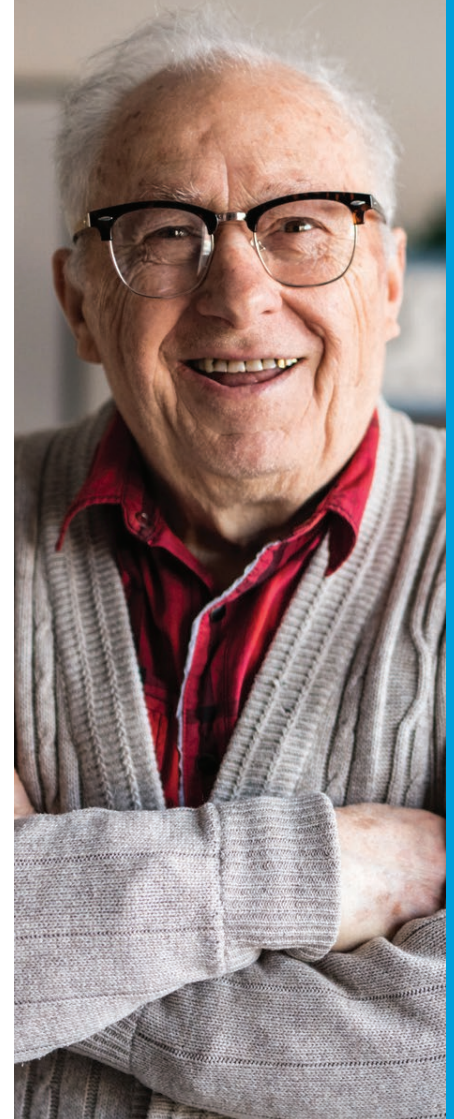
Developing a primary care decision making tool

OCCG embarked on developing a decision making tool for when an existing GP practice contract ends or when significant population growth is planned. This included discussions with a local patient participation group and two workshops to co-produce a process for Oxfordshire to guide decision-making.

The aim was to co-produce a decision-tree using various scenarios and possible options to guide the work. Participants included members from Oxfordshire HOSC, a representative for Witney Town Council, patient representatives, the patient member of Oxfordshire Primary Care Commissioning Committee, Local Medical Committee, NHS England and Healthwatch.

At the first workshop the various options available to the CCG were considered and scenarios were then discussed in small table groups with the intention of identifying the questions needing to be asked and the possible ordering to create a decision tree.

The output of these discussions was taken away and used to create a draft decision tree. A further workshop was organised to review this draft and to test the scenarios. Several changes were made to refine the decision tree. The complexity of the task was acknowledged and it was agreed that the decision tree would be re-drawn to incorporate the necessary changes. Following this a final decision tree was produced and used to inform future primary care provision in the county.



Involving You

Involving you

To help develop the best possible health services across the county, OCCG needs help from local people in Oxfordshire. It is clear that the best service improvements are those where patients, the wider public and key stakeholders (including local authorities, the voluntary sector and social care partners) work together to co-design services based on local health and care needs.

We are committed to putting patients first and applying the principle of 'No decision about me without me' in our commissioning approach through open and continuous communication with patients, the public, OCCG members, staff and key stakeholders.

Our work programmes are based on input from some or all of these:

- stakeholder analysis (in partnership with our health inequalities team)
- communications and engagement plans
- patient advisory groups
- patients on clinical advisory groups
- public meetings
- workshops

- surveys and focus groups
- formal consultation
- equality impact assessment

There is detailed information about the many ways to get involved with shaping local health and care services on the Oxfordshire Clinical Commissioning Group website

www.oxfordshireccg.nhs.uk/get-involved

included discussions with a local patient participation group and two workshops to co-produce a process for Oxfordshire to guide decision-making.



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